03560.002855

PATENT APPLICATION

fee or

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of:

KOICHIRO KAWAGUCHI

Examiner: J. Culler

,

Group Art Unit: 2854

Appln. No.: 09/900,949

Filed: July 10, 2001

January 7, 2003

Commissioner for Patents Washington, DC 20231

For: RECORDING APPARATUS

AMENDMENT

Sir:

In response to the Official Action mailed October 7, 2002, the Examiner is respectfully requested to amend the above-identified application as follows.

IN THE SPECIFICATION:

Please substitute the paragraph starting at page 1, line 8 and ending at line 12 with the following replacement paragraph. A marked-up copy of this paragraph, showing the changes made thereto, is attached.

A



Docket No.: 03560.002855

KOĮCHIRO KAWAGUCHI

Application No.: 09/900,949

Examiner: J. Culler

Filed: July 10, 2001

Group Art Unit: 2854

For: RECORDING APPARATUS

Date: January 7, 2003

COMMISSIONER FOR PATENTS

Washington, D.C. 20231

Sir:

Transmitted herewith is an Amendment in the above-identified application.

X No additional fee is required.

The fee has been calculated as shown below



CLAIMS AS AMENDED						
	(2) CLAIMS REMAINING AFTER AMENDMENT		(4) HIGHEST NO. PREVIOUSLY PAID FOR	(5) PRESENT EXTRA	RATE	ADDITIONAL FEE
TOTAL CLAIMS	27	MINUS	27	= 0	x \$ 9 \$18	\$0.00
INDEP. CLAIMS	1	MINUS	3	= 0	x \$42 \$84	\$0.00
Fee for Multiple Dependent claims \$140°/\$280						
			TOTAL ADDITI		·	\$0.00

°Verified Statement claiming sr	mall entity status is enclosed, if not filed previously.
A check in the amount of \$	_ is enclosed.

	Charge \$ to Deposit Account No. 06-1205. A duplicate copy of this sheet is enclosed.
	16
X	Any prior general authorization to charge an issue fee under 37 C.F.R. 1.18 to Deposit Account No. 06-1205 is hereby revoked. The Commissioner is hereby authorized to charge any additional fees under 37 C.F.R. 1.16 and 1.17 which may be required during the entire pendency of this application, or to credit any overpayment, to Deposit Account No. 06-1205. A duplicate copy of this paper is enclosed.
	A check in the amount of \$ to cover the fee for a month extension is enclosed.
	A check in the amount of \$ to cover the Information Disclosure Statement fee is enclosed.
X	Applicant's undersigned attorney may be reached in our Washington, D.C. office by telephone at (202) 530-1010. All correspondence should continue to be directed to our below-listed address.

Attorney for Applicant

Respectfully submitted,

Registration No. 33,628

FITZPATRICK, CELLA, HARPER & SCINTO 30 Rockefeller Plaza
New York, New York 10112-3801
Facsimile: (212) 218-2200

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